

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TENACIOUS TRUTH PAC

ADDRESS (number and street)

PO BOX 57449

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20037

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00619650

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kennedy, Sean, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kennedy, Sean, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TENACIOUS TRUTH PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	246.82	
(c) Total Receipts (from Line 19)	115000.04	117229.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	115246.86	117229.99
7. Total Disbursements (from Line 31).....	102319.33	104302.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12927.53	12927.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TENACIOUS TRUTH PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

106000.00

107239.95

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

106000.00

107239.95

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

106000.00

107239.95

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

990.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

9000.04

9000.04

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

115000.04

117229.99

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

115000.04

117229.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	83330.65	85313.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	83330.65	85313.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	17998.68	17998.68
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	990.00	990.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	102319.33	104302.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	102319.33	104302.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	106000.00	107239.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	106000.00	107239.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	83330.65	85313.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	9000.04	9000.04
38. Net Operating Expenditures (subtract Line 37 from Line 36)	74330.61	76313.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. De La Haye Jousselein, Anne, , ,

Mailing Address 780 Third Avenue

City
New York

State
NY

Zip Code
10017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Shaughnessy, Brian, , ,

Mailing Address One Revere Park

City
Rome

State
NY

Zip Code
13440

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reserve Copper

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pidot, Whitney, , ,

Mailing Address 370 South Beach Road

City
Hobe Sound

State
FL

Zip Code
33455

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Goelet LLC

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

106000.00

TOTAL This Period (last page this line number only).....▶

106000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 17

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mobile Walla

Mailing Address 401 Park Ave South

City
New York

State
NY

Zip Code
10016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA15.4157

Amount of Each Receipt this Period

9000.00

☐ Memo Item

Refund for overpayment

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9000.00

9000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Clark Hill PLCMailing Address 601 Pennsylvania Ave NW
Suite 1000 N. Bldg.City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Legal fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4123**

Amount of Each Disbursement this Period

1099.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Clark Hill PLCMailing Address 601 Pennsylvania Ave NW
Suite 1000 N. Bldg.City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Legal fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4124**

Amount of Each Disbursement this Period

211.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gridiron CommunicationsMailing Address 3903 Portage Rd.
Suite C, #262City
South BendState
INZip Code
46628Purpose of Disbursement
Data services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4125**

Amount of Each Disbursement this Period

2908.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4218.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Gridiron CommunicationsMailing Address 3903 Portage Rd.
Suite C, #262City
South BendState
INZip Code
46628Purpose of Disbursement
Mail production services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	1		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4136**

Amount of Each Disbursement this Period

5431.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kennedy, Sean, , ,

Mailing Address 1603 A St. SE #3

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Strategy consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	9		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4130**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kennedy, Sean, , ,

Mailing Address 1603 A St. SE #3

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Strategy consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	2		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4159**

Amount of Each Disbursement this Period

12500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20431.66

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Mobile Walla

Mailing Address 401 Park Ave South

City
New YorkState
NYZip Code
10016Purpose of Disbursement
Digital creative services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

C**Transaction ID : SB21B.4128**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ozean Media

Mailing Address P.O. Box 1101

City
AlachuaState
FLZip Code
32616Purpose of Disbursement
Polling services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2016

FEC Identification Number

C**Transaction ID : SB21B.4137**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ozean Media

Mailing Address P.O. Box 1101

City
AlachuaState
FLZip Code
32616Purpose of Disbursement
Media production expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

FEC Identification Number

C**Transaction ID : SB21B.4135**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 1913 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Bank fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4139**

Amount of Each Disbursement this Period

210.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 1913 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Bank fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4140**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 1913 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Bank fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4142**

Amount of Each Disbursement this Period

36.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

281.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C**Transaction ID : SB21B.4113**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C**Transaction ID : SB21B.4138**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

FEC Identification Number

C**Transaction ID : SB21B.4126**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4127**

Amount of Each Disbursement this Period

 2500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	5		2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4131**

Amount of Each Disbursement this Period

 7500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	1		2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4132**

Amount of Each Disbursement this Period

 3500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 13500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Fundraising consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

FEC Identification Number

C**Transaction ID : SB21B.4133**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorensen, Jessica, , ,

Mailing Address 9 Fairbanks Street

City
AugustaState
MEZip Code
04330Purpose of Disbursement
Data production services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C**Transaction ID : SB21B.4134**

Amount of Each Disbursement this Period

1750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2750.00

83180.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENACIOUS TRUTH PAC

Full Name (Last, First, Middle Initial)

A. Kennedy, Sean, , ,

Mailing Address 1603 A St. SE #3

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C**Transaction ID : SB26.4190**

Amount of Each Disbursement this Period

990.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

990.00

990.00

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 16 OF 17

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4146

TENACIOUS TRUTH PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
Kennedy, Sean, , ,☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 1603 A St. SE #3

City

Washington

State

DC

ZIP Code

20003

Original Amount of Loan

990.00

Cumulative Payment To Date

990.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y Y
06 / 14 / 2016

Date Due

M M / D D / Y Y Y Y Y

Interest Rate

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TENACIOUS TRUTH PAC				FEC IDENTIFICATION NUMBER ▼ C C00619650	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	
Full Name of Payee Gridiron Communications			Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 09 / 13 / 2016		
Mailing Address 3903 Portage Rd. Suite C, #262			Amount <input type="text" value="17998.68"/>		
City South Bend	State IN	Zip Code 46628	Transaction ID : SE.4100		
Purpose of Expenditure Direct mail production-oppose Jack Martins		Category/Type <input type="text" value=""/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 09 / 13 / 2016		
Name of Federal Candidate: MARTINS, JACK, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="17998.68"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation		
Purpose of Expenditure		Category/Type	<input type="text" value="MM/DD/YYYY"/>		
Name of Federal Candidate:			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State:		
Calendar Year-To-Date Per Election for Office Sought <input type="text" value=""/>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <input type="text" value="17998.68"/> <input type="text"/> <input type="text" value="17998.68"/> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Kennedy, Sean, , , Signature			Date <input type="text" value="MM/DD/YYYY"/> 10 / 27 / 2016		

[Electronically Filed]